FOR INSTRUCTIONS, SEE BACK OF FORM

File with: Iowa Ethics and Campaign

Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, apply 11 107 - 2 617 8: 59 electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

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COMMITTEE NAME (Must be same as on State	ement of Organization)			
BRANSTETTER FOR RED O	PAK MAYOR	1 1 1	ORM OR-2	B1001 05::55
IMPORTANT: Indicate by # type of committee you ar	e reporting for. 6	(Re	v. 12/2009)	DISCLOSURE REPORT
(4) County Central Committee (5) County Candidate	(6)City Candidate (7)School Board or Other Politica C (10)School Board or Other Political Subdivision PAC	For	Office Use Or	×14002
11) Local Ballot Issue				
CANDIDATE COMMITTEES ONLY:	Political Party (if applicable)	1 1		<u></u>
Candidate Name	Political Party (if applicable)	1 1		<u> </u>
LARRAY BRANDSTETTER		1 1		
MAYOR	Dietrint (if Sanata or House)	Audi	neo	
ate reports are subject to possible civil and crimina candidate's committee, and the chairperson, for any	al penalties. Pursuant to Iowa Code sections 68B.326 other type of committee, is the individual responsible	e for filing tim	ely and accur	ate reports.
Michael Dhity	(712) 623-9/69		0/29/	//
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE S	IGNED
AM FILING A 10 / 29 /11	REPORT FOR (1) ELECTION	I //2\NON EI	ECTION VE	ΛD
AM FILING A (report date)	Indicate by		ECHORIE	rit.
☐CHECK IF AMENDMENT TO REPORT DATI				An af Phanklan
CHECK IF AMENDMENT TO REPORT DATE		1	ittees, enter Da	ite of Election
Check if this is final (termination) report and a (You must continue to file reports until		County & Loc which Flection	al Committees	, enter County in
STATEMENT OF CAS	H ON HAND			
CASH ON HAND at the beginning of the reporting committee. This amount MUST be the of the last reporting period or must be:		\$	0.	90
ADD TOTAL MONEY TAKEN IN THIS	S PERIOD		<u> </u>	
Schedule A: Cash Contributions total	(Attach Schedule A) (*also see in-kind below)		186	5.00
	tach Schedule F)		-	
	Property (Attach Schedule H)			
(Schedule H applies to Cand	didates' Committees Only)			
	SUB-TOTAL	\$	186	5.00
SUBTRACT TOTAL MONEY SPENT	THIS PERIOD			
	h Schedule B) (**also see debts and loans below))	1700	0.48
	Attach Schedule F)			
	riod (if final report balance must be zero)		164	+52
•	Attach Schodule E)		8	5.00
•	- Attach Schedule E)			
•	Attach Schedule F)	\$		
CONSULTANT BREAKDOWN (Schedule G Att	tached?)		YES V	NO
CANDIDATE COMMITTEES ONLY:			_	• •
VALUE OF CAMPAIGN PROPERTY (From Sch	nedule H - Attach Schedule H)	\$	0.6	90

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

BRANDSTETTER FOR RED OAK MAYOR

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS			
CHECK THIS BOX IF AMENDING FORM				

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08/01/11	ID#	LARRY BRANDSTETTER 5 ROBM HILL LANE REDOAK, IA- SISCE	HIMSELF	\$ 900.00	
08/11/11	ID# CK#	JIM D. SIPFORD 2168 ST. HWY 48 REDOML, IA 57566		250.00	
08/13/11	ID#	HELEN MURANY 810 E. CONNING STREET RED ONN, IA SISCOL		100.00	
08/17/11	ID# CK#	MICHAEL J. PORTZ, O.B. 1801 ZIBB STREET RED OM, EA STSGL		100.00	
08/2/11	ID# CK#	NICK ZIMMER 1503 MILLER ASTERNIE RED OAK, IA 51566		15.00	
08/29/11	ID# CK#	CAROL L. OLSEN 221 TRADERS PONTCIRCLE COUNCIL BLUFFS, IA 51501		100.00	
08/30/11	ID#	NORMA WILSON 2016 FOREST AVENUE RED OAK, IA 51566		200.00	
08/30/11	ID#	EDWAND A. OR SANDRA KRCILER 1022 E. VALLEY STREET RED OAK, IA SISCL		50.00	
10/12/11	ID# CK#	CATHERINE OR DOWNS BLOOM 801 PROSPORT ST. RED DAK, IA STILL		100.00	
10/25/11	ID# CK#	FRUNG F. + CYNTHAE. BANGSTON P.O. BOX 1179 FREELAND, WA 98249		50.00	
			SUB-TOTAL		

TOTAL (if last page of this schedule)

- / of /

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES				
CHECK THIS BOX IF					

COMMITTEE NAME (Must be same as on Statement of Organization)

BRANDSTETTER FOR REDOAK MAYOR

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/04/11	ID# CK#	PROMOTINAL CONCEPTS 220 E. COOLBALLEY ST. NED DAK, IA 57566	YARD SIGNS	\$ 811.06
09/28/11	ID# CK#	RED OAK PRINTING CO. 506 4B STREET REDOAK, IA 57566	CAMPAIGN FLYERS	236.25
10/20/11	ID#	HAWKEYE COMMUNICATIONS 1991 INDAWORD AVE. REDOAN, IA SING	RABIO ADS	384.25
10/21/11	ID# CK#	RED OME EXPRESS P. O. BOX 377 RED OME, JA 57524	NEWSPAPER ADS	268.92
	ID# CK#			

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 1700.48

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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COMMITTEE NAME (Must be same as on Statement of Organization)	E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
BRANDSTETTER FOR RED OAK MAYOR Reset Form		K THIS BOX IF DING FORM

SCHEDULE

DATE RECEIVED	NAME AND ADDRESS	RELATIONSHIP TO CANDIDATE	DESCRIPTION OF IN KIND	ESTIMATED FAIR MARKET	√ IF FOR
(MM/DD/YR)	OF CONTRIBUTOR	* (if applicable)	CONTRIBUTION	VALUE	FUND-RAISER CONTRIBUTION
`	LESTERALLAN NESSON			\$	
, ,	100 C C 1 TO TO		LETTERS FOR	2-	
10/08/11	1805 FOREST DAUE RED OAK, IA 5756L		SIGNS	85.00	
100/11	RED OAK, IA SISCE				
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			<u> </u>		
			SUB-TOTAL	\$ 0 -	
				\$5.00 \$ \$5.00	
•			TOTAL (if last	\$	
			page of this		
			schedule)	85.00	
			schedule)		
					, ,

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / of / (for Schedule E)